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12/27/01
JCP13 U.S.UTILITY
PATENT APPLICATION
TRANSMITTAL

Only for new nonprovisional applications under 37 CFR § 1.53(b))

Attorney Docket No.	20206-18
First Inventor	Gaetan Mathieu
Title	METHOD AND SYSTEM FOR COMPENSATING THERMALLY INDUCED MOTION OF PROBE CARDS
Express Mail Label No.	EM372933447US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status.	8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference sequence listing, a table, or a computer program listing appendix or computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <input type="checkbox"/> CD-ROM or CD-R (2 copies); or <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <input type="checkbox"/> Informal <input checked="" type="checkbox"/> Formal [Total Sheets 12]	9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
5. Oath or Declaration [Total Pages 3]	10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney
a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) (for continuation/divisional with Box 18 completed)	11. <input type="checkbox"/> English Translation Document (if applicable)
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: Unexecuted Declaration Naming Inventors

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No: 10/003012

Prior application information: Examiner: _____ Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input type="checkbox"/> (Insert Customer No. or Attach bar code label here)			or	<input checked="" type="checkbox"/> Correspondence address below
Name	Woodard, Emhardt, Naughton, Moriarty and McNett				
Address	Bank One Center/Tower 111 Monument Circle, Suite 3700				
City	Indianapolis	State	IN	Zip Code	46204-5137
Country	USA	Telephone	(317) 634-3456	Fax	(317) 637-7561
Name (Print/Type)	Daniel J. Lueders			Registration No. (Attorney/Agent)	32,581
Signature	<i>D. J. Lueders</i>			Date	December 27, 2001

Express Mail Label Number EM372933447US

Date of Deposit December 27, 2001

I hereby certify that this paper is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR Section 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington DC 20231.

D. J. Lueders
Signature of person mailing paper or fee

FEE TRANSMITTAL FOR FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number			
Filing Date	December 27, 2001		
First Named Inventor	Gaetan Mathieu		
Group Art Unit			
Examiner Name			

Total Amount of Payment (\$740)

Attorney Docket Number 20206-18

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

23-3030

Deposit Account Number

Deposit Account Name Woodard, Emhardt, Naughton, Moriarty & McNett

Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27.

2. Payment Enclosed:
 Check Credit Card Money Order Other

FEE CALCULATION

1-BASIC FILING FEE

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility Filing Fee	740
106	330	206	165	Design Filing Fee	
107	510	207	255	Plant Filing Fee	
108	740	208	370	Reissue Filing Fee	
114	160	214	80	Provisional Filing Fee	
SUBTOTAL (1) (\$740)					

2-EXTRA CLAIM FEES

Total Claims	18	-20** =	0	Extra Claims	Fee From Below	Fee Paid
Independent Claims	02	-3** =	0	X	108	0
Multiple Dependent				X		

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	**Reissue independent claims over original patent
110	18	210	9	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) (\$ 740)				

**or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES					
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65	Surcharge – late filing fee or oath	
127	50	227	25	Surcharge – late provisional filing fee or cover sheet.	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	400	216	200	Extension for reply within second month	
117	920	217	460	Extension for reply within third month	
118	1,440	218	720	Extension for reply within fourth month	
128	1,960	228	980	Extension for reply within fifth month	
119	310	219	155	Notice of Appeal	
120	310	220	155	Filing a brief in support of an appeal	
121	270	221	135	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive – unavoidable	
141	1,240	241	620	Petition to revive – unintentional	
142	1,240	242	620	Utility issue fee (or reissue)	
143	440	243	220	Design issue fee	
144	600	244	300	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Petitions related to provisional applications	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	710	246	355	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	249	355	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	279	355	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	
Other Fee (specify)					
* Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$)

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	Signature	Registration No. (Attorney/Agent)	32,581	Telephone	(317) 634-3456
D. Lueders				Date	December 27, 2001

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